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APR 29 2005

PETITION AND FEE FOR EXTENSION
OF TIME UNDER 37 CFR 1.136(a)
Examining Group 3743
Patent Application
Docket No. UF-T391D1
Serial No. 09/457,709

April 29, 2005


Margaret Efron, Patent Attorney

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner : Aaron J. Lewis
Art Unit : 3743
Applicants : Richard J. Melker, Michael J. Banner, Samsun Lampotang, Paul B. Blanch, Neil R.
Euliano, Ronald G. Carovano, Jr.
Serial No : 09/457,709
Filed : December 10, 1999
For : Patient Ventilatory Method Utilizing Height-Based Ventilator Parameter
Calculations

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

PETITION AND FEE FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Sir:

The applicants request that the period for response be extended two months through and
including May 6, 2005. Please charge the fee of \$450.00 to Deposit Account 19-0065.

Any additional fees as required by 37 CFR 1.16 or 1.17 should be charged to Deposit
Account No. 19-0065.

Respectfully submitted,



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DRS/la
Attachment: Amendment under 37 CFR §1.111

JASH-RESPAUFUF-T391D1-2EXT.DOC/DNB/la

PATENT APPLICATION FEE DETERMINATION RECORD
Effective January 1, 2003

Application or Docket Number

09457709

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	53 minus 20 =	*
INDEPENDENT CLAIMS	4 minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

5/21/03

	(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	49	Minus 53	= -
Independent	4	Minus 6	= -
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY TYPE ☐

OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	375.00
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	FEE
BASIC FEE	750.00
X\$18=	
X84=	
+280=	
TOTAL	

11/19/03

	(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	49	Minus 53	= -
Independent	4	Minus 4	= -
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

4/29/05

	(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	49	Minus 53	= -
Independent	3	Minus 4	= -
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

PATENT APPLICATION FEE DETERMINATION RECORD
Effective November 10, 1998

Application or Docket Number

CLAIMS AS FILED - PART I

FOR	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	53 minus 20 =	33
INDEPENDENT CLAIMS	4 minus 3 =	1
MULTIPLE DEPENDENT CLAIM PRESENT		

* If the difference in column 1 is less than zero, enter "0" in column 2

12/10/99

CLAIMS AS AMENDED - PART II

AMENDMENT A	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	53 Minus	53	-
Independent	4 Minus	4	-
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

4/8/02

AMENDMENT B	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	53 Minus	53	-
Independent	4 Minus	4	-
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

12/12/02

AMENDMENT C	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	49 Minus	53	-
Independent	4 Minus	4	-
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐ OR **OTHER THAN SMALL ENTITY**

RATE	FEE	OR	RATE	FEE
	380.00	OR		760.00
X\$ 9=		OR	X\$18=	594
X39=		OR	X78=	78
+130=		OR	+260=	
TOTAL		OR	TOTAL	1432

SMALL ENTITY OR **OTHER THAN SMALL ENTITY**

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL		OR	TOTAL	
ADDIT. FEE		OR	ADDIT. FEE	

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL		OR	TOTAL	
ADDIT. FEE		OR	ADDIT. FEE	

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL		OR	TOTAL	
ADDIT. FEE		OR	ADDIT. FEE	